Appendix C

Task Identification Process (TIP) List

Services or Installation of Goods

Subcontract Title		
Subcontracting Firm	Subcontract No	
Subcontractors and vendors providing services, including	the installation of purchased goods, are required to com	plete
a TIP List. This list does not include every Environment, S	afety, and Health- (ES&H-) related concern at LLNL; ins	tead
it is intended to highlight major concerns common to most	on-site service activities.	
Fire Protection		
Will the job involve welding, soldering, or torch cutting?	Yes No N/	۸
Will flammable/combustible liquids be used or stored?	Yes No N/A	٨
Will temporary heating devices be used?	Yes No N/	٦
Will water and/or fire extinguishers be provided on the job		
(Examples include any work involving solvents, fuels, sold diesel fuel delivery services, high-voltage cable splicing se hood cleaning and fire suppression service, and water pipe	ervices, elevator repair services, flooring services, cafete	
Electrical Safety		
Will lock-out and tag be required?	Yes No N/A	
Will work be performed on or near energized equipment, li Note: If yes, no work may be performed until reviewed an		_
If yes, describe:		
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(Examples of this work include industrial shredder maintenance, power machinery repair services, elevator repair, overhead bridge crane maintenance/repair services, cathodic protection services, hydraulic test systems repair/service, and air compressor rebuilding services.)

Overhead Power Lines and Hidden Utilities Will hazards associated with overhead power lines (e.g., will clearance) be an issue? Yes __ No __ N/A __ Will potential underground or hidden utilities need to be located on the job site? Yes __ No __ N/A __ If yes, how will this be accomplished and who will do it (e.g., LLNL, subcontractor, other)? (Examples of this work include tree pruning services, tree removal/relocation/replacement, underground utility identification services, concrete sawing and removal services, drill rig operations [e.g., soil characterization services, water well drilling, geotechnical investigation], and wall drilling.) **Electrical Power Transmission and Distribution** Will there be repair or maintenance of transmission and distribution lines and equipment? Yes __ No __ N/A __ What methods will the subcontractor use to prevent accidental contact with energized lines or equipment? Will workers be using nonconductive tools? Yes __ No __ N/A __ (Examples of this work include high-voltage cable splicing services, telecommunications upgrade services, and elevator repair services.)

(Examples of this work include awning/canopy installation, tent installation, and furniture/fixture installation.)

Yes __ No __ N/A __

Yes __ No __ N/A __

Powder-Actuated Tools

Will powder-actuated tools be used?

Are operators trained and qualified?

Fall Protection

will workers be exposed to a potential fall in excess of 6 feet?	Yes No N/A
If yes, describe how workers will be protected:	
(Examples of this work include tree pruning, window and ledge cleaning, window repla splicing services, overhead bridge crane maintenance/repair services, roll-up door replawning/canopy installation, overhead air exchange installation, construction inspection	acement, tent installation,
Scaffolding and Ladders	
Will scaffolding or ladders be used and approved worker access be provided?	Yes No N/A
Will scaffolding or ladders be exposed to wet and/or slippery conditions?	Yes No N/A
Will scaffolding or ladders need to be secured to the building?	Yes No N/A
Does the subcontractor have a designated supervisor for the work?	Yes No N/A
(Examples of this work include window cleaning, tree pruning, window replacement, ro installation, and awning/canopy installation.)	Il-up door replacement, tent
Demolition and Salvage	
Does the subcontractor have a demolition/salvage plan?	Yes No N/A
How will passersby be protected from potential hazards?	
How will materials be lowered?	

Have the demolition materials been evaluated for reuse or recycling?	
Cranes, Forklifts, and Manlifts	
Will crane(s), forklift(s), manlift(s), or other lifting equipment be used? Has lifting and rigging equipment been inspected and certified as required? Does the subcontractor have a designated competent operator? Will lifting attachments be used in conjunction with forklifts that are approved for use by the forklift manufacturer? (Examples of this work include heavy or oversized goods delivery, tree pruning, overhead bridge maintenance/repair, high-voltage cable splicing, and roll-up door replacement.)	Yes No N/A Yes No N/A Yes No N/A Yes No N/A ge crane
Motor Vehicles and Heavy Equipment	
Will the subcontractor be using motor vehicles or heavy equipment onsite? Will all operators have valid state driver's licenses? Will vehicles, including safety features (e.g., rollover protection), be inspected? (Examples of this work include delivery of goods, personnel transportation services, trailer relopumpout and recycling services, asphalt grinding and asphalt sealing services, portable toilet sabatement and mowing services, landscape hydroseed services, drill rig operations [e.g., soil of water well drilling], tree stump grinding, concrete sawing and removal, and scrap iron removals.	ervices, weed/brush characterization services,
Ergonomics	
Will potential ergonomic injuries be controlled?	Yes No N/A
Confined Spaces	
Will work be performed in vaults, manholes, trenches, or tanks more than 4 feet deep? If yes, describe:	Yes No N/A
Does the subcontractor have a written confined space work program?	Yes No N/A
Will work involving welding, torch cutting, brazing, grit blasting, or any machinery use be performed in or near confined spaces?	Yes No N/A
Will painting, application of other coatings, or use of chemicals, solvents,	163 NO N/A
combustibles, or similar hazardous materials be performed in confined spaces? (Examples of this work are many and varied; any service that could involve working in vaults, per cathodic protection services, high-voltage cable splicing services, telecommunications upgrade inspection and testing services, water/fuel storage tank clean-out services, and utility corrosion	es, construction
Respiratory Protection	
Will the job involve materials or processes requiring respiratory protection? Does the subcontractor have a written respiratory protection program? (See sections on Confined Spaces, Chemicals, Asbestos, Lead, and Silica Dust [OSHA considerespirators].)	Yes No N/A Yes No N/A lers dust masks
Personal Protective Equipment	
Will the subcontractor provide workers with appropriate personal protective clothing and equipment (e.g., leather gloves, hardhats, eye protection, face protection, safety shoes, hearing protection, chemical gloves/clothing)? If yes, describe:	Yes No N/A

Does the subcontractor have a written Personal Protective Equipment program? (Examples of this work include most industrial-type services/installations.)	Yes _	No _	N/A
Asbestos-containing Materials			
Is there a possibility that asbestos containing materials (ACM) will be encountered? If yes, describe:	Yes_	_ No _	N/A
Does the subcontractor have an asbestos work program? Has a 10-day notification to the Bay Area Air Quality Management District (BAAQMD) been submitted for renovations involving ACM greater than or equal to 100 linear feet, 100 square feet, or 35 cubic feet prior to renovation? (Examples of this work include disturbance or penetrations of flooring, walls, ceiling tiles, pipe I particularly in older facilities; e.g., furniture/fixture installation, carpeting/flooring services, and b services)	Yes _ agging,	No _ transit	
Lead-containing Materials			
Is there a possibility that lead-containing materials will be encountered? If yes, describe:	Yes _	_ No _	N/A
Does the subcontractor have a lead work program? (Examples of this work include disturbance of lead-based paint, particularly in older facilities. Le certain electrical circuitry and metal alloys; .e.g., overhead bridge crane maintenance/repair, his services, boiler repair/tune-up services, fixture installation services, and chiller maintenance/repair.	ead is a gh-volta	also pre age cab	ole splicing
Chemicals, Solvents, Fumes, Vapors, and Dusts (OSHA PELs and ACGIH TLVs apply) Will work involve chemicals, solvents, painting, welding, torch cutting, brazing or grit blasting? If yes, describe:	Yes _	_ No _	N/A
Will MSDSs be submitted for all potentially hazardous chemicals and solvents? Will emergency eyewashes and showers be available to employees as necessary? Will ventilation requirements be reviewed to preclude exposure to employees? Are all paints in compliance with Bay Area Air Quality Management District	Yes_	No _	N/A N/A N/A
(BAAQMD) limits on volatile organic compound (VOC) content? Will an LLNL environmental analyst evaluate all grit blasting waste before disposal? (Examples of this work include operations involving cleaning solvents, adhesives, paints, binde services, oil pumpout and recycling services, diesel fuel filtration services, emergency hazardo decontamination services, storage tank clean-out services, countertop installation (epoxies), por flooring.)	Yes _ ers; e.g. us wast	No _ , solver te remo	nt recycling oval/
Silica Dust			
Will work involve jackhammering, rotohammering, drilling, grinding or other disturbance of concrete that might create silica dust? (Examples of this work include installations, pavement/concrete grading and paving, concrete services.)			_ N/A moval
Noise			
Will employees be exposed to high noise levels on this job? Does the subcontractor have a written hearing conservation program? (Examples of this work include installations and heavy equipment operation.)			N/A N/A

Heat Stress

If heat stress is an issue, will heat stress monitoring be routinely performed in accordance with the ACGIH TLVs? If yes, describe:	Yes _	_ No _	_ N/A
Will a rest area be provided in a cooler environment (e.g., utilizing shade, fans, air conditioning, etc.)?	Vos	No	NI/A
Will the subcontractor provide liquid replenishment at the job site?			_ N/A N/A
Will a work/rest regimen be enforced? Has training on recognizing the signs and symptoms of heat stress and	_		_ N/A
heat stroke been provided to workers and supervisors?	Yes_	_ No _	_ N/A

Radiation and Laser Safety

Will radiation-producing equipment be used onsite? Will special radiation dosimetry be required (other than normal LLNL-issued dosimeters)? Will special radiation Work Permit for Visitors be required? Will an LLNL Radiation Work Permit for Visitors be required? Will assa 3 or 4 lasers be used, repaired, or calibrated onsite? Will the use of alignment lasers be necessary to perform work? Will at 10-day notification to the Bay Area Air Quality Management District (BAAQMD) be required? Will all 10-day notification to the Bay Area Air Quality Management District (BAAQMD) be required? Will all excess equipment and debris waste be evaluated by an LLNL environmental analyst to determine proper disposal? Will all excess equipment and debris waste be evaluated by an LLNL environmental analyst to determine proper disposal? Will adequate measures be taken to prevent discharge of hazardous and regulated materials to the environment? Yes No N/A Will adjupment and vehicles be inspected daily for leaks of fuel, engine coolant, and hydraulic fluid? Yes No N/A Storm Water Pollution Prevention Plan (SWPPP) Will all work be performed in compliance with the LLNL SWPPP? Will all concrete mixing, concrete cutting, and equipment-rinsing wastewaters be discharged to a low area or into a constructed basin for dewatering? Yes No N/A (Examples of this work include concrete sawing and removal and hosing down equipment/work surfaces during cleup.) Additional Concerns Does the subcontractor recognize any other potential ES&H concerns that could be associated with this work? Yes No N/A If yes, describe:	Will radioactive material/sources be used onsite?		Yes _	_ No _	_ N/A
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Does the subcontractor recognize any other potential ES&H concerns that could be associated with this work? If yes, describe: Describe mitigation measures:		ng down equipment/work	surface	es durir	ng clean
could be associated with this work? If yes, describe: Describe mitigation measures:	Additional Concerns				
If yes, describe: Describe mitigation measures:		that			.
			Yes _	_ N0 _	_ N/A
TIP List completed by:	Describe mitigation measures:				
TIP List completed by:					
	TIP List completed by:				
Subcontractor's signature Date	Subcontractor's signature	Date			
Title/Firm Phone		Phone			

Subcontractor's designated person responsible for onsite environment, safety, and health:		
Name	Title	
Firm	Phone	